

**Exhibit F**  
**Inmate File of Jeffery Bernard Sanford**

## INMATE REQUEST SLIP

Name JEFFERY B. SANFORD Date 7-7-06D-6  
LOCATION

☐ Telephone Call    ☐ Doctor    ☐ Dentist    ☐ Time Sheet  
☐ Special Visit    ☐ Personal Problem    ☐ Other

Briefly Outline Your Request. Give To Jailer

IT HAS BECOME VERY OBVIOUS THAT MY NAME  
 IS BEING "BLACK-BALLED" IN LEE COUNTY DETENTION  
 CENTER, IN WHICH MY CONSTITUTIONAL RIGHTS  
 OF DUE PROCESS TO PARTICIPATE IN COMMUNITY  
 WORK STATUS OF OTHER TRUSTEE PRIVILEGES  
 AFFORDED TO MANY OTHER INMATES WITH COUNTY  
 TIME, ALSO SINCE I'M NOT HOUSED IN AN AREA  
 APPROPRIATE TO MY CLASSIFICATION LEVEL, THEN CAN I

Do Not Write Below This Line - For Reply Only

It is your behavior towards the staff  
 at the Detention Center that prohibit me  
 from placing you on trustee at this time.  
 I need to see a change in your behavior  
 before I consider giving you the privilege  
 of being a trustee.

Approved \_\_\_\_\_ Denied ☒ Collect Call 7-7-06

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To  
 Those The Request is Directed.

☐ Lieutenant☐ Chief Deputy☐ SheriffDate 7-7-06 Time Received 0655

CORRECTION OFFICER

Col. A. Cobb

FORM: LCS-038 (6/99)

YOU PLEASE ALLOW ME TO BE MOVED TO E-WING  
SO THAT I CAN GET ME A CELL TO DO MY TIME  
AS POSITIVE AS POSSIBLE, AND YOU WILL NOT  
HAVE TO WORRY ABOUT ALL THESE "HERESIES"  
PERTAINING TO MY NAME. ALSO I REALLY DON'T  
LIKE BEING PLAYED WITH OR LIED ~~ON~~ BY INMATES,  
AND I WILL NOT PLAY WITH THESE CRIMINALS  
AS CHILDREN!

BR716-3

ALBANY DEPARTMENT OF CORRECTIONS  
INMATE SUMMARY AS OF 06/21/2006INST: 241  
CODE: CIADM

IS: 00143572A INMATE: SANFORD, JEFFREY RACE: B SEX: M  
 NST: 241 - LEE DORM: JO JAIL CR: DOY DOM DOD  
 DB: 1-065 SSN: 065  
 LIAS: BERNARD, JEFFERY B ALIAS: SANFORD, BERNARD  
 LIAS: SANFORD, J B ALIAS: SANFORD, J BERNARY  
 LIAS: SANFORD, JEFF ALIAS: SANFORD, JEFFERY  
 DM DT: 06/09/2006 DEAD TIME: DOY DOM DOD  
 DM TYP: NEW COMMITMENT - SPLIT SENTENC STAT: NEW COMMITMENT - SPLIT SENTENC  
 CURRENT CUST: DTW-5 CURRENT CUST DT: 06/09/2006 PAROLE REVIEW DATE: - NONE -  
 SECURITY LEVEL: NO CLASSIFICATION RECORD FOUND  
 SERVING UNDER ACT446 LAW IN CLASS IV CURRENT CLASS DATE: 06/09/2006  
 INMATE IS EARNING : STRAIGHT TIME

COUNTY	SENT DT	CASE NO.	CRIME	JL-CR	TERM
EE	06/09/06	ND6000037	THEFT OF PROPERTY II	0000	DOY DOM DOD CS
			4YRS PROBATION		
			ATTORNEY FEES : \$000500	HABITUAL OFFENDER : Y	
			COURT COSTS : \$0000274	FINES : \$0000000	RESTITUTION : \$0000100

TOTAL TERM	MIN RELI DT	GOOD TIME BAL	GOOD TIME REV	LONG DATE
DOY DOM DOD	06/08/2007	DOY DOM DOD	DOY DOM DOD	06/08/2007

INMATE LITERAL:

## DETAINEE WARRANTS SUMMARY

INMATE CURRENTLY HAS NO DETAINER WARRANT RECORDS

## ESCAPEE-PAROLE SUMMARY

PAROLED FRM 001:07/24/89 RVK:10/05/92 DELQ:05/06/91 RECAP:08/06/92 RTN:09/10/92  
 CONTINUED 202:01/25/91 RVK:00/00/00 DELQ:00/00/00 RECAP:08/06/92 RTN:08/06/92  
 PAROLED FRM 001:11/22/93 RVK:00/00/00 DELQ:05/01/95 RECAP:03/30/95 RTN:05/18/95  
 REINSTATED 050:07/06/95 RVK:06/17/98 DELQ:08/11/97 RECAP:03/10/98 RTN:06/03/98  
 PAROLED FRM 050:09/09/02 RVK:09/03/03 DELQ:07/21/03 RECAP:07/18/03 RTN:07/21/03

CONTINUED ON NEXT PAGE

CBR716\*3

ALABAMA DEPARTMENT OF CORRECTIONS  
INMATE SUMMARY AS OF 06/21/2006

INST#: 241  
CODE: CIADM

\*\*\*\*\* CONTINUATION \*\*\*\*\*

AIS: 00143572A INMATE: SANFORD, JEFFREY RACE: B SEX: M

\*\*\*\*\*

ESCAPEE-PARDIE SUMMARY

INMATE CURRENTLY HAS NO PROBATION 754 RECORDS

INMATE HAS NO ESCAPES FROM ADDC SINCE OBSCIS RECORDING B

\*\*\*\*\*

DISCIPLINARY/CITATION SUMMARY

INMATE CURRENTLY HAS NO DISCIPLINARY/CITATION RECORDS

Lee County Detention Center  
**INMATE REQUEST SLIP**

Name JEFFERY B. SANFORD Date 6-30-06 <sup>D.C.</sup> **LOCATION**  
☐ Telephone Call ☐ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☐ Personal Problem ☒ Other

Briefly Outline Your Request. Give To Jailer

REQUEST TO GO TO LAW LIBRARY  
PLEASE, IVE MISSED THE LAST THREE  
TIMES.

Do Not Write Below This Line - For Reply Only

Law Lib 7-1-06

cpl Lyles

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☐ Lieutenant

☐ Chief Deputy

☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER \_\_\_\_\_

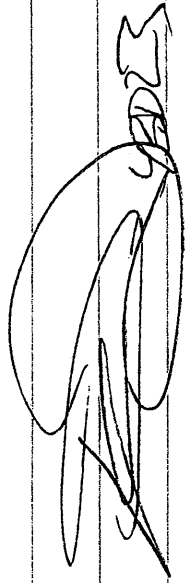
Jeffery B. Sanford F-6

REQUEST FOR LAW LIBRARY

Co-22-06

Went to Law Library on 6/25/06  
in 18:40 hrs

Approved

A large, stylized handwritten signature, likely of Jeffrey B. Sanford, written in black ink. The signature is written over the word "APPROVED" and extends across several lines of the document.

Lee County Detention Center  
**INMATE REQUEST SLIP**

F-6  
**LOCATION**

Name JEFFERY B. SANFORD Date 6.19.06

☐ Telephone Call      ☐ Doctor      ☐ Dentist      ☐ Time Sheet  
☐ Special Visit      ☐ Personal Problem      ☒ Other

Briefly Outline Your Request. Give To Jailer

I HAVE RECIEVED A 10 SPLIT 1yr COUNTY  
AND WOULD LIKE TO BE MOVE TO WORK -  
RELEASE OR TRUSTEE FIRST. PLEASE CONSIDER

Do Not Write Below This Line - For Reply Only

Denied At This Time

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☒ Lieutenant

☐ Chief Deputy

☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER

Sgt. Jones

FORM: LCS-038 (6/99)



REQUEST FOR

LAW LIBRARY

JEFFERY SANFORD

F-4

4-24-06

44/25146

SGT Threat

4 REPORTS 4-20-06

EFFERY SANFORD

REQUEST TO GO TO

LIBRARY PLEASE

Taken 4-20-06

THANK YOU 104

# INMATE REQUEST SLIP

F4  
**LOCATION**

Name JEFFERY B SANFORD Date 4-28-06

☐ Telephone Call ☐ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☐ Personal Problem ☐ Other

Briefly Outline Your Request. Give To Jailer

REQUEST TO GO TO LIBRARY OF LAW  
FOR RESEARCH ON CASE

Do Not Write Below This Line - For Reply Only

Approved \* Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☐ Lieutenant ☐ Chief Deputy ☐ Sheriff  
Date 4/29/06 Time Received 1839

CORRECTION OFFICER SGT Threat

FORM: LCS-038 (6/99)

1

## INDIVIDUAL'S PERSONAL EFFECTS

In Possession Of

SHERIFF'S OFFICE, LEE COUNTY

NAME Sanford, Jeffery

SEARCHED BY \_\_\_\_\_

TIME \_\_\_\_\_ DATE 10-22-04

MONEY \$ 0.00

ARTICLES BY NAME (Jacket)  
Pants, Shirt, Shoes, Doc ID  
letters

The above listing is all my personal effects turned in to Sheriff's Office at the time of booking.

Signature \_\_\_\_\_

Please Call \_\_\_\_\_

## PROPERTY RECEIPT

I hereby acknowledge receipt of the articles named above.

On this date

Signature

**INSTRUCTIONS FOR USE**

- 1) USE BALLPOINT PEN TO COMPLETE ALL INFORMATION BEFORE LOADING BAG.
- 2) TEAR WHERE INDICATED AND RETAIN RECEIPT.
- 3) PLACE BAG ON FLAT SURFACE. REMOVE LINER TO EXPOSE ADHESIVE, SMOOTHLY PRESS ALONG THE MOUTH OF BAG TO SEAL IT SECURELY.

**PROPERTY ENVELOPE**

FOR CASHIER USE ONLY	
INMATE'S NAME	INSTITUTION      DATE REC.
ICN NO. _____	
CC NO. _____	
DATE <u>7-07-05</u>	
CORRECTION OFFICER <u>OFC Cooper</u>	
SHIELD NO. <u>43D-22</u>	

Money \$ <u>3.18</u>		Food Stamps \$ _____	
Quantity	Property	Quantity	Property
<u>1</u>	Wallet	_____	Watch
_____	Purse	_____	Rings
<u>1</u>	Lighter	_____	Pr.Earrings
_____	Keys	_____	Bracelet/Wrist Chain
_____	Pr.Shoelaces	_____	Necklace/Neck Chain
Other _____			

I ACKNOWLEDGE THE SURRENDER OF THE PROPERTY LISTED.

[Signature]  
SIGNATURE OF INMATE

7-07-05  
DATE

PROPERTY RECEIVED FROM INMATE BY:

NAME OF EMPLOYEE AND ID# OFC Cooper / 43D-22

SIGNATURE OF EMPLOYEE [Signature] (PRINT) OFC Cooper (ID #) 7-7-05  
DATE

SIGNATURE OF INMATE/DESIGNEE

ACKNOWLEDGE THE RETURN OF MY PROPERTY

ON 7-5-05



**EXPRESS ALONG THE MOUTH** **REMOVE LINER TO EXPOSE ADHESIVE,**  
**BAG TO SEAL IT SECURELY.**

**PRO** **ENVELOPE**

INMATE'S NAME Sanford, Jeffery

ICN NO. \_\_\_\_\_

CC NO. \_\_\_\_\_

DATE 11/11/05

CORRECTION OFFICER Dowdell

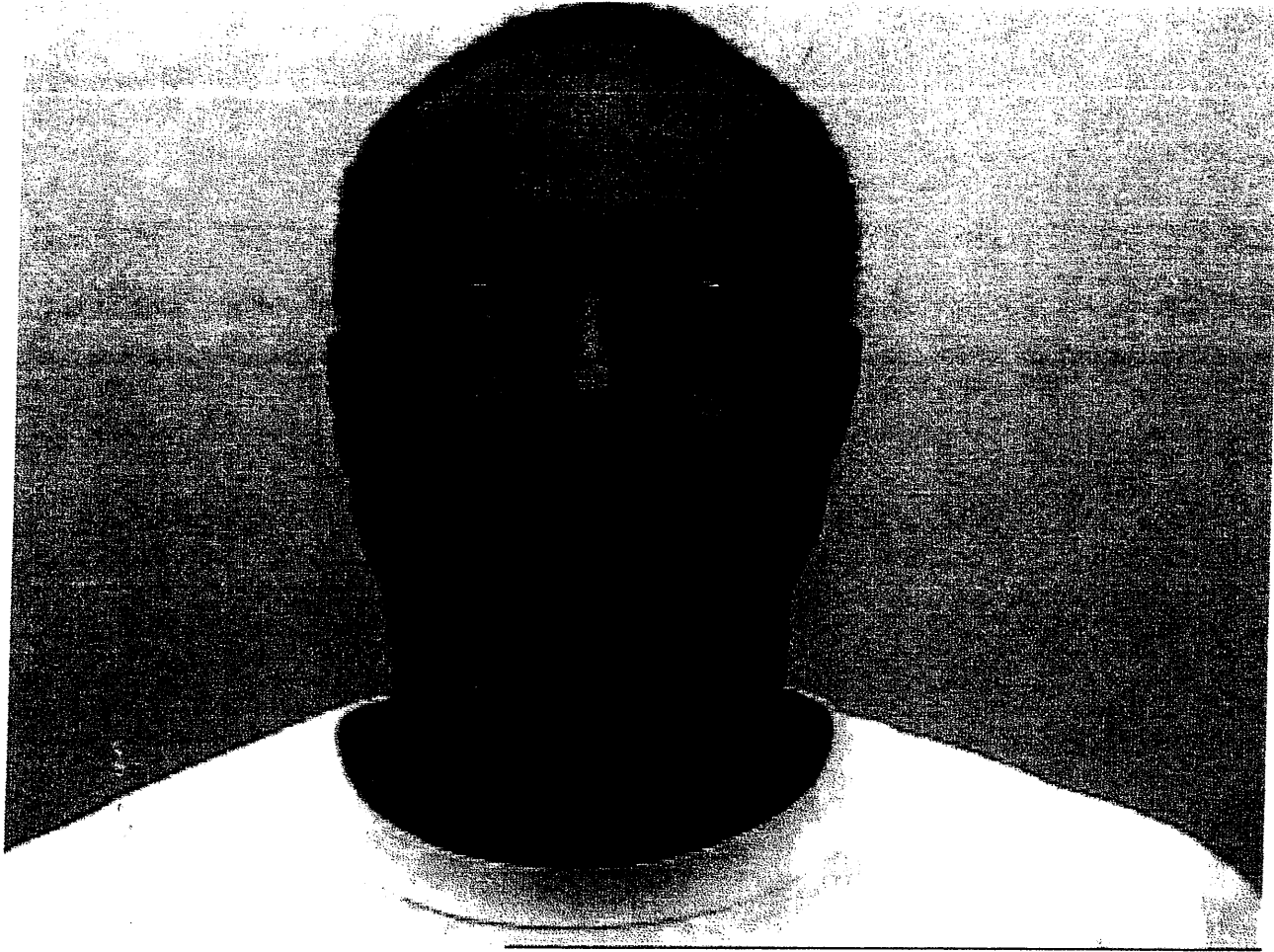
SHIELD NO. 43041

STATION	DATE REC.

Money \$ 13 Food Stamps \$ \_\_\_\_\_

<u>Quantity</u>	<u>Property</u>	<u>Quantity</u>	<u>Property</u>
_____	_____	_____	_____
_____	Purse	_____	Comb
_____	Lighter	_____	Personal rap _____
_____	Keys	_____	Eyeglasses
_____	Pr. Shoelaces	_____	Belt
_____	Necklace/Neck Chain	_____	_____

her Blue Tabagon



ront

LEE COUNTY SHERIFF'S DEPARTMENT  
REGULATIONS RECEIPT

(Form #7)

Date: 13 Mar 06

Time: 0735

I, Terry Sanford, have received copy number \_\_\_\_\_ of the Rules and Regulations governing inmates in the Lee County Jail which I am/am not (mark one out) able to read. I understand that while in this institution I will abide by these Rules and Regulations.

I will return the copy of the Rules and Regulations upon my release from jail. I also understand that I will be responsible for the loss or any damage of the Inmate Rules and Regulations Handbook and will be charged \$2 for its replacement. I also understand that if I fail to pay for the replacement of the lost or damaged handbook I will have additional criminal charges filed against me for destruction of county property.

Years of School \_\_\_\_\_

[Signature]  
Inmate's Signature

\_\_\_\_\_ has today received copy number \_\_\_\_\_ of the Lee County Sheriff's Department Rules and Regulations for Inmates.

- ☐ Said inmate stated to me that he was able to read the Rules and Regulations.
- ☐ Said inmate stated that he was not able to read the Rules and Regulations and I explained the orientation rules to him.

[Signature]  
Jailer's Signature

Date: 13 Mar 06 Time: 7:27



FILL  
TO HERE

## PROPERTY ENVELOPE

<b>Sanford, Jeffery</b> INMATE'S NAME ICN NO. _____ CC NO. _____ DATE <u>2-06</u> CORRECTION OFFICER <u>Blair</u> SHIELD NO. _____		FOR CASHIER USE ONLY <table border="1"> <tr> <th>INSTITUTION</th> <th>DATE REC.</th> </tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </table>	INSTITUTION	DATE REC.																		
INSTITUTION	DATE REC.																					

Money \$ _____		Food Stamps \$ _____	
Quantity	Property	Quantity	Property
<u>1</u>	Wallet	_____	Watch
_____	Purse	_____	Rings
_____	Lighter	_____	Pr.Earrings
_____	Keys	_____	Bracelet/Wrist Chain
_____	Pr.Shoelaces	_____	Necklace/Neck Chain
her <u>1</u>	<u>Hat, wallet, Purse, Papers</u>	<u>1</u>	Belt

I ACKNOWLEDGE THE SURRENDER OF THE PROPERTY LISTED.

  
 SIGNATURE OF INMATE

DATE \_\_\_\_\_

PROPERTY RECEIVED FROM INMATE BY:

NAME OF EMPLOYEE AND ID# \_\_\_\_\_

(PRINT)

(ID #)

SIGNATURE OF EMPLOYEE \_\_\_\_\_

DATE \_\_\_\_\_

  
 SIGNATURE OF INMATE/DESIGNEE

ACKNOWLEDGE THE RETURN OF MY PROPERTY

ON \_\_\_\_\_

PROPERTY RETURNED TO INMATE/DESIGNEE BY:

NAME OF EMPLOYEE AND ID# \_\_\_\_\_

(PRINT)

(ID #)

SIGNATURE OF EMPLOYEE \_\_\_\_\_

2/22/06

IN THE CIRCUIT COURT OF LEE COUNTY, ALABAMA

State of Alabama, ex rel.  
Barbara Ann Sanford,  
Plaintiff,

VS.

Jeffery B. Sanford,  
Defendant.

\* CIVIL ACTION NO.  
\* 41 DR1996-492.0  
\*  
\* DHR #30347  
\*  
\*  
\*

**ORDER FOR FAILURE TO APPEAR WRIT**

This case came for hearing on a review on the 21st day of November, 2005. Hon. Margaret A. Mayfield, Assistant District Attorney, appeared for the State. The defendant signed an acknowledgment in court on August 22, 2005 for this hearing. The defendant failed to appear for Court. There are arrearages of \$2,741.90 plus interest of \$2,128.01 as of November 17, 2005.

IT IS THEREFORE THE ORDER OF THIS COURT that a Writ of Arrest for failure to appear and failure to comply with the Order of this Court shall be executed on the defendant, Jeffery B. Sanford, at 212 Roden Court # 510, Opelika, AL 36801 by the Lee County Sheriff's Office or any Law Enforcement Officer of the State of Alabama. The defendant shall be held in the Lee County Jail until such time as a receipt is presented for payment of a purge amount of \$500.00 towards the outstanding arrearages.

This WRIT of Arrest shall be entered on the National Crime Information Center system within fourteen (14) days of this Order.

Done this the 9<sup>th</sup> day of December, 2005.

  
JACOB A. WALKER, III Circuit Judge

Social Security # 310-80-9095

Birthdate 12/30/1965 — black male

**COPY: Lee County Sheriff's Department  
Attention: Warrant Clerk**

**FILED**  
DEC 13 2005

IN OFFICE  
CORINNE T. HURST  
CIRCUIT CLERK

LEE COUNTY SHERIFF'S DEPARTMENT  
SPECIAL REPORT.

Subject:

Sanford, Jeffery

Opelika, Ala.,

LCDC

To the Sheriff of Lee County:

I report the following

Hoarding Lortab during file  
Call which occurred at 0830 o'clockthis 4/8/06 M., atLCDC

Below give full-particulars, together with name of principals and witnesses and their address.

During file call with  
Officer Sim I/m Sanford, Jeffery  
Complaining about tooth pain. Informing  
him He (Sanford) saw our Dentist  
Dr. King Friday & have Lortab.  
Gave I/m (Sanford) Meds  
He (Sanford) continue talking when  
ask open hand have Lortab. file  
Between fingers. Informing I/m of  
Section 10.4 inmate Rules &  
Regulation Book.

Reported by

Nurse Stewart

Address

LEE COUNTY DETENTION CENTER

Phone

Complaint Received by

NURSING

How

Assigned to

PO BOX 2407

OPELIKA, AL 36803-2407

LEE COUNTY SHERIFF'S DEPARTMENT  
SPECIAL REPORTSubject I/m Jeffery Sanford Opelika, AL 4/17/06

To the Sheriff of Lee County:

I report the following I/m Sanford trying to send a letter  
to a female inmate in C-8 which occurred at 4:30 o'clock  
this A M. at Lee County Detention Center

Below give full-particulars, together with name of principals and witness and their address

At Approximately 4:30 a.m. I, Ofc. Wiltsie,  
was picking up mail in cell F4. When I picked  
up the letters I saw a stamp through the  
envelope. When I looked closer there was another  
envelope inside. The address on the envelope inside  
was addressed to: Trinisha Avery  
P.O. Box 2407  
Opelika, AL 36801

I took the letter and gave it to Sgt Threat.  
The return address on the top envelope was from:

Jeffery Sanford  
P.O. Box 2407  
Opelika, AL 36801

When I got to Central I/m Jeffery Sanford called  
over the intercom stating he wanted his stamps  
back from the letters to reuse. He was told  
by Sgt Threat that he would not get the  
stamps or the letters back.

Nothing Further

Reported by Will Wiltsie

Address \_\_\_\_\_ Phone \_\_\_\_\_

Complaint received by \_\_\_\_\_ How \_\_\_\_\_

Assigned to \_\_\_\_\_

LEE COUNTY DETENTION CENTER  
DISCIPLINARY REPORT

(Form #28)

Inmate Sanford, Jeffery Bernard Custody Maximum Number 3823  
Last First MiddleAssignment cell F-4 is being charged by ofc WiltzieWith rule violation 14.2 B-18 unauthorized contact between inmateson or about 4/17/06 199  , Time 4:30 a.m./p.m. Location cell F-4Circumstances are as follows: In Sanford attempted to mail a letter to a female in C8 by putting it inside of another envelope to be mailed back in.MAJOR ☒MINOR ☐SERIOUS ☐Notifying Officer: Sgt. S. P. SmithSignature of Arresting Officer ofc Will-WiltTime & Date notified: 15:25 4-17-06Inmate's Signature [Signature]Witnesses desired: NO ☐ If YES, (List)                     Circumstances Investigated By:                     Hearing date                      Time                      Plea ( ) Guilty ☒ Not GuiltyIf guilty, inmate must affix signature                     Committee Findings & Reasons: Guilty Due to Testimony And EvidenceCommittee Recommendations: Guilty: 10 Days Lock Down Loss of visitation and store.Witnesses:                     Sgt. J. P. Smith 43024  
Signature of ChairmanJames S. Higgins 43020  
Signature, Member[Signature] OFC 43031  
Signature, MemberCopy delivered to inmate: Date 5-3-06Time 3:20Inmate's Signature [Signature]Action - Date                     Appeal - Date (attach copy)                     Approved                     Approved                     Disapproved                     Denied                     Other (Specify)                     Other (Specify)

LEE COUNTY SHERIFF'S DEPARTMENT  
NOTIFICATION OF CHARGES

(Form #29)

TO: Jeffery Sanford DATE: 4/17/06

YOU ARE HEREBY NOTIFIED THAT IT IS ALLEGED THAT YOU HAVE COMMITTED THE FOLLOWING RULE VIOLATIONS:

14.2 B-18 unauthorized contact between  
Inmates

YOU HAVE BEEN CHARGED WITH THESE RULE VIOLATIONS BY OFFICER(S):

Off. Wiltsie

THE FACTS ON WHICH THESE CHARGES ARE BASED ARE:

I/m Sanford attempted to mail a letter  
to a female inmate in cell C8 by putting the  
letter inside of another envelope so it could  
be mailed back into the facility

THE MAXIMUM PENALTY FOR THE VIOLATION(S) IS:

10 Days lock down loss of all privileges  
except clergy, media and attorney

YOU HAVE THE OPTION OF REQUESTING A DISCIPLINARY HEARING FOR THE ABOVE CHARGE(S) OR ACCEPTING DISCIPLINARY ACTION WITHOUT A HEARING. SHOULD YOU DESIRE A DISCIPLINARY HEARING, YOU MUST REQUEST THE HEARING IN WRITING ON THE INMATE REQUEST FORM ATTACHED TO THIS NOTIFICATION WITHIN EIGHT (8) HOURS AFTER RECEIVING THIS NOTIFICATION.

15:25 4/17/06  
DATE & TIME OF NOTIFICATION

Off. Wiltsie  
OFFICER MAKING REPORT

The arresting officer was asked to read his/her statement (Exhibit A) and at the conclusion the chairperson asked if he/she had anything further to add to his/her statement.

The chairperson then announced that the board would go into closed session to deliberate on the findings. All persons except those constituting the membership of the board were excused.

The board in closed session and written ballot found Inmate Jeffrey Sanford  
GUILTY.

Inmate Jeffrey Sanford and the arresting officer were called before the board and the verdict was announced. Inmate Jeffrey Sanford was then asked if he had any matter to submit in extenuation and mitigation and he stated, "I did not violate Any Rule in The I/m Hand Book, Mail Process, or Any Rule of I/m Hand Book".

The board went into closed session on the sentence. The board recommended the following:

10 DAYS LOCKDOWN - 10 DAYS LOSS OF STORE AND VISITATION  
Excluding visits from Clergy

The sentence was announced to Inmate Jeffrey Sanford. The chairperson explained the appeal process to Inmate Jeffrey Sanford.

Arresting Officer Recommendation:

10 DAYS LOCKDOWN, LOSS OF STORE AND VISITATION

MAIL WAS OPEN IN Pres. of INMATE SANFORD. MAIL WAS NOT  
Privileged mail



**LEE COUNTY SHERIFF'S DEPARTMENT  
SYNOPSIS OF MAJOR/MINOR DISCIPLINARY HEARING**

(Form #30)

ALL THOSE INVOLVED IN THE CASE WERE SWORN IN BY THE CHAIRPERSON.

The Lee County Jail Disciplinary Board convened at 0518 on 4-21-06, to hear the evidence in the case involving Inmate Jeffrey Sanford, # \_\_\_\_\_.

The board consisted of Chairperson Sgt. Parquillo, Q and Member Off. [unclear], Off. Scroggins

The accused and Arresting Officer Off. Wiltz were brought before the board.

The chairperson explained to Jeffrey Sanford that he was charged with violating Rule # H, 2 B-18 of Inmate Handbook (revised August 1988).

Jeffrey Sanford was further advised that on 4-17-06 at 15:25 he was served with "Notice of Disciplinary Hearing" and given a copy of the notice.

The chairperson explained that according to due process requirements, he must be given at least 24 hours notice of the date that the hearing will take place. Furthermore, that the hearing must be given within seven (7) calendar days of the time his custody changed and that he is to be given the opportunity to request any witnesses on his behalf. The chairperson asked Jeffrey Sanford if he understood due process and he replied, "Yes".

The chairperson explained to Jeffrey Sanford that he was charged with violation of Rule # 14.2 B-18, Unauthorized Contact Between Inmates.

The chairperson asked Jeffrey Sanford if he understood the charges against him and he replied, "No-- Dont understand".

Jeffrey Sanford was then asked how he pled to the charge and he stated, "NOT Guilty".



Lee County Detention Center  
**INMATE REQUEST SLIP**

ANY SHIFT SUP.

E-6-H  
**LOCATION**

Name JEFFERY B. SANFORD Date MAY 10, 06

☐ Telephone Call ☐ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☒ Personal Problem ☐ Other

Briefly Outline Your Request. Give To Jailer

I HAVE NOT CAUSED NO PROBLEMS IN THE CELLS, I DON'T BE ACTING A FOOL WITH INMATES OR OFFICERS, I DON'T BE FIGHTING OR ARGUING ARGURING WITH FOLKS. I KEEP MY AREA CLEAN. I DON'T DEAL WITH TOO MUCH CONTRABAND. I TRY TO STAY CLEAN AS MUCH AS POSSIBLE. I HAVE SERVED MORE

Do Not Write Below This Line - For Reply Only

OVER

INMATE MOVED TO CELL E-6.

JUL 13 05  
 52106

Approved \_\_\_\_\_ Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☐ Lieutenant ☐ Chief Deputy ☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER \_\_\_\_\_

FORM: LCS-038 (6/99)

THAN HALF OF MY DAYS IN SEG,  
AND HAVEN'T CAUSED ANY PROBLEMS  
IN SEG.

THE ONLY CONFLICT I'M EXPERIEN-  
-CING IN LEE COUNTY DETENTION  
CENTER IS OLD ISSUE THAT WAS  
BOUGHT UP BY OFFICER WILTSIE  
(1998).  
I'M WILLING TO MAKE PEACE WITH  
THIS GUY AND HIS PADRES, BECAUSE  
I MUST FOCUS ON FIGHTING MY  
CASE COMING UP MAY 23, 2006.  
I WOULD LIKE TO BE RELEASED  
EARLY ALSO, BECAUSE I'M MISSING  
THE NBA PLAY-OFFS.

PLEASE CONSIDER AN  
EARLY RELEASE FROM SEG ASAP.  
THANK YOU

Lee County Detention Center  
**INMATE REQUEST SLIP**

F-6  
**LOCATION**

Name JEFFERY B. SANFORD Date 5-12-06

☐ Telephone Call ☐ Doctor ☐ Dentist ☐ Time Sheet  
☐ Special Visit ☐ Personal Problem ☒ Other

Briefly Outline Your Request. Give To Jailer

REQUEST TO GO TO LAW LIBRARY.

Do Not Write Below This Line - For Reply Only

TAKEN ON 5/14/2006  
"RED NIGHTS"

Approved [Signature] Denied \_\_\_\_\_ Collect Call \_\_\_\_\_

All Request Will Be Routed Through The Sergeant Over The Jail, Then Forwarded To Those The Request is Directed.

☐ Lieutenant ☐ Chief Deputy ☐ Sheriff

Date \_\_\_\_\_ Time Received \_\_\_\_\_

CORRECTION OFFICER AARON 43031

PLEASE PRINT CLEARLY

Newlin  
7-22-03  
CT

## INMATE VISITOR INFORMATION

All information MUST be COMPLETE and MUST be LEGIBLE. Information which is incomplete or not legible will result in that person not being listed on your visitation card. All visitors must have a photo I.D. to get in. Children under 12 years of age cannot visit.

ONE PERSON PER LINE

Newly arrived inmates are not eligible for visitation during their first seven days at the Lee County Detention Center in order to allow time for a background check to be conducted on the visitors listed below. Visitation is a privilege and may be restricted or withdrawn at anytime.

Inmate Name JEFFERY SANFORD Cell # F-3

Visitor #1

Name BARBARA SANFORD Relationship WIFE  
Address 212 RODEN CT. #510 City OPELIKA State AL  
Phone # 745-0325

Visitor #2

Name GLORIA BALLARD BUSH Relationship SISTER  
Address 1015 YORK AVE. #11 City OPELIKA State AL  
Phone # 741-7888

Visitor #3

Name JEFFERY SANFORD JR. Relationship SON  
Address 212 RODEN CT. #510 City OPELIKA State AL  
Phone # 745-0325

Visitor #4

Name JOANNE DARR FOREMAN Relationship AUNT  
Address COUNTY Rd 724, LEE Rd. City OPELIKA State AL  
Phone # 864-0973

FORM C-80

STATE OF ALABAMA  
DEPARTMENT OF CORRECTIONS  
RECEIPT OF RELEASED CONVICT

DATE: 09/15/2004

20040915-438

CBR201

INSTITUTION: DRAPER CORRECTIONAL CENTER

DATE RELEASED: OCT 23, 2004

NAME: SANFORD, JEFFREY BERNARD

SERIAL NUMBER: 00143572

COUNTY COMMITTED FROM: LEE

DATE COMMITTED: MAR 28, 1986

HOW RELEASED: EOS ON SHORT TIME

## REMARKS:

RESTITUTION OWED/COURT COSTS: \$813.00 CONTACT CIRCUIT COURT CLERK

\*\*\*\*\*

\*\*\*\*\*

RECEIVED FROM WARDEN:

*James Delonch*

DOLLARS: \_\_\_\_\_

IN FULL PAYMENT OF AMOUNTS AS SET OUT BELOW:

DISCHARGE MONEY: 00 YR. 00 MO. \$ .00

*Forwarding Address*

BUS FARE TO: \_\_\_\_\_ \$ \_\_\_\_\_

1 DAY TRAVEL - - - - - \$ \_\_\_\_\_

1 OUTFIT CLOTHING- - - - - \$ \_\_\_\_\_

TOTAL - - - - - \$ \_\_\_\_\_

SIGNED

WITNESS

WITNESS

 DETAINER/WARRANT  
 RECEIPT SIGNATURE

\*\*\*\*\*

\* NOTE: ALL SIGNATURES MUST BE MADE IN INK. \*

\*\*\*\*\*

DATE: JUL 24, 2003 NAME: SANFORD, JEFFREY BERNARD SERIAL NUMBER: 00143572

\*\*\*\*\* OFFENSES FOR WHICH THIS FUGITIVE WAS CONVICTED \*\*\*\*\*

<><><>	OFFENSE	<><><>	SENTENCE DATE	SENTENCE TERM	SENTENCING COUNTY	CS/CC
	ROBBERY I		03/28/1986	17/00/00	LEE	CS
	THEFT OF PROPERTY II		08/25/1992	5/00/00	LEE	CC

\*\*\*\*\* E N D P A G E 2 \*\*\*\*\*

PLEASE PRINT CLEARLY

CT  
7-18-03

## INMATE VISITOR INFORMATION

All information MUST be COMPLETE and MUST be LEGIBLE. Information which is incomplete or not legible will result in that person not being listed on your visitation card. All visitors must have a photo I.D. to get in. Children under 12 years of age cannot visit.

ONE PERSON PERSON PER LINE

Newly arrived inmates are not eligible for visitation during their first seven days at the Lee County Detention Center in order to allow time for a background check to be conducted on the visitors listed below. Visitation is a privilege and may be restricted or withdrawn at anytime.

Inmate Name SANFORD, JEFFERY Cell # F-3

Visitor #1

Name BARBARA SANFORD Relationship WIFE  
Address 212 ROSEN CT. #510 City OPELIKA State AL  
Phone # 334-745-0325

Visitor #2

Name GLORIA BALLARD BUSH Relationship SISTER  
Address 1015 YORK AVE #111 City OPELIKA State AL  
Phone # \_\_\_\_\_

Visitor #3

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Phone # \_\_\_\_\_

Visitor #4

Name \_\_\_\_\_ Relationship \_\_\_\_\_  
Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_  
Phone # \_\_\_\_\_

**Receipt**  
**(Form #3)**

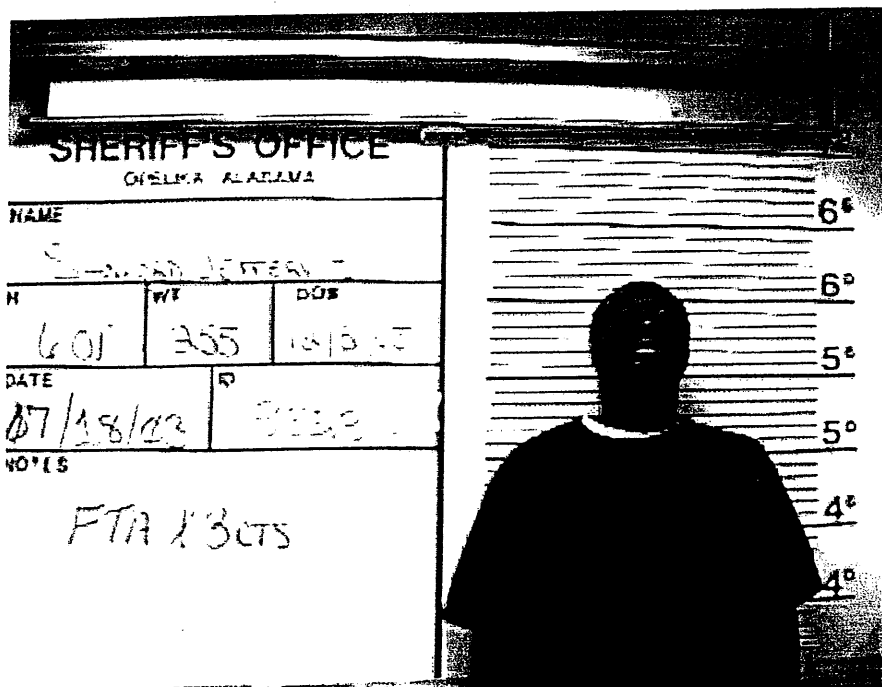
**\*ALL PROPERTY LEFT OVER 30 DAYS AFTER RELEASE WILL BE DISPOSED OF.**

[illegible]






Front



Front

**SHERIFF'S OFFICE**  
OCELMAR, ALABAMA

NAME SHERMAN, JEFFERY T		
H 6'01"	WT 255	DOB 12/15/75
DATE 07/18/03		ID 3382
NOTES FTA X3CTS		



A mugshot of a man in profile, facing right. He is positioned against a height chart that has markings for 5' and 6'. The man's head reaches approximately the 5'8" mark. The background of the mugshot is a height chart with horizontal lines and numerical markings.

Left Profile

**WAIVER OF EXTRADITION-FUGITIVE WARRANT OR ARREST**

**STATE OF INDIANA**

**COUNTY OF MARION**

I hereby give my free and voluntary consent to return to the State of Alabama, County of Lee, City of Opelika, in the company of law enforcement officers from that jurisdiction or persons designated by them to receive my custody from this County and State, without awaiting the usual form of Requisition from that State or the Governor's Warrant from the Governor of Indiana, and hereby exonerate and hold harmless the Sheriff of this County, his/her Deputies, and all other judicial and law enforcement officers in this State, from any blame, compulsion, or interference in this connection.

I hereby agree not to challenge my extradition and removal to that State nor to apply to the Governor of Indiana to decline to order my extradition.

This agreement and waiver is made by me without reference to my guilt or innocence, and shall not be considered in any manner as prejudicing my case in the requesting state. This agreement shall not be considered in any manner an admission of guilt of or participation in any violation of the law.

Witness: [Signature] Prisoner Printed Name  
[Signature] Jeffrey Sanford  
Witness: [Signature]  
Date: 7/10/03

Received into my custody from the Sheriff of Marion County, Indiana, the above named prisoner, to be transported to the State and County where he/she is charged with the crime(s) Robbery. V.R.

Dated: \_\_\_\_\_

\_\_\_\_\_  
(Printed Name)

\_\_\_\_\_  
(Department)

FUGITIVE RIGHTS

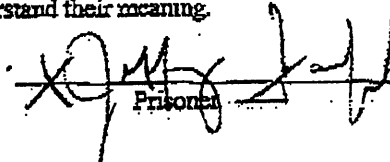
This is to inform you that you have been arrested, and are being held pursuant to a demand from a sister state, to-wit : Alabama to answer the crime of *V.O.P.* Robbery.

Before we surrender you to authorities of the state of Alabama, we must advise you of the following rights:

- (1) You have the right to demand legal counsel to represent in these proceedings;
- (2) You have the right to test the legality of the arrest, and if you so desire, we will take you forthwith before a Judge of a Court of record of this State, who will fix a reasonable time to allow you to apply for a Writ of Habeas Corpus;
- (3) If you apply for a Writ of Habeas Corpus, you will not be surrendered to the demanding state until a hearing is held.

ACKNOWLEDGEMENT

I the undersigned, hereby acknowledge that the foregoing rights were read to me and I full understand their meaning.

  
Prisoners

REFUSAL TO SIGN ACKNOWLEDGEMENT

I the undersigned, a Marion County Deputy Sheriff, do hereby state that I have read the above rights to \_\_\_\_\_ and he has refused to sign same.

\_\_\_\_\_  
Marion County Deputy Sheriff

## LEE COUNTY SHERIFF'S OFFICE

03/13/2006 07:27:28

## MEDICAL SCREENING FORM

PAGE 1

Booking No: 060001328 Date: 03/13/2006 Time: 07:23 Type: NORMAL  
 Inmate to Bill: LEE COUNTY Facility: COUNTY JAIL

Inmate Name: SANFORD JEFFERY BERNARD Race: B Sex: M  
 DOB: 12/22/1965 Age: 40 SSN: [REDACTED] Height: 6'01" Weight: 255

- N 1. Is inmate unconscious?
- N 2. Does inmate have any visible signs of trauma, illness, obvious pain and bleeding, requiring immediate emergency or doctor's care?
- N 3. Is there obvious fever, swollen lymph nodes, jaundice or other evidence of infection that might spread through the facility?
- N 4. Any signs of poor skin condition, vermin, rashes or needle marks?
- N 5. Does inmate appear to be under the influence of drugs or alcohol?
- N 6. Any visible signs of alcohol or drug withdrawal?
- N 7. Does inmate's behavior suggest the risk of suicide or assault?
- N 8. Is inmate carrying any medication?
- N 9. Does the inmate have any physical deformities?
- N 10. Does inmate appear to have psychiatric problems?
11. Do you have or have you ever had or has anyone in your family ever had any of the following?
- |                       |                                  |                              |
|-----------------------|----------------------------------|------------------------------|
| <u>N</u> a. Allergies | <u>N</u> f. Fainting Spells      | <u>N</u> k. Seizures         |
| <u>N</u> b. Arthritis | <u>N</u> g. Hearing Condition    | <u>N</u> l. Tuberculosis     |
| <u>N</u> c. Asthma    | <u>N</u> h. Hepatitis            | <u>N</u> m. Ulcers           |
| <u>N</u> d. Diabetes  | <u>N</u> i. High Blood Pressure  | <u>N</u> n. Venereal Disease |
| <u>N</u> e. Epilepsy  | <u>N</u> j. Psychiatric Disorder | <u>N</u> o. Other (Specify)  |

Other: \_\_\_\_\_

12. For females only:

- \_\_\_\_\_ a. Are you pregnant?
- \_\_\_\_\_ b. Do you take birth control pills?
- \_\_\_\_\_ c. Have you recently delivered?

LEE COUNTY SHERIFF'S OFFICE

03/13/2006

07:27:28

MEDICAL SCREENING FORM

PAGE 2

Booking No: 060001328 Date: 03/13/2006 Time: 07:23 Type: NORMAL  
Inmate to Bill: LEE COUNTY Facility: COUNTY JAIL

Inmate Name: SANFORD JEFFERY BERNARD Race: B Sex: M  
DOB: 10/25/65 Age: 40 SSN: [REDACTED] Height: 6'01" Weight: 255

- N 13. Have you recently been hospitalized or treated by a doctor?
- N 14. Do you currently take any non-prescription medication or medication prescribed by a doctor?
- N 15. Are you allergic to any medication?
- N 16. Do you have any handicaps or conditions that limit activity?
- N 17. Have you ever attempted suicide or are you thinking about it now?
- N 18. Do you regularly use alcohol or street drugs?
- N 19. Do you have any problems when you stop drinking or using drugs?
- N 20. Do you have a special diet prescribed by a physician?
- N 21. Do you have any problems or pain with your teeth?
- N 22. Do you have any other medical problems we should know about?
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

I HAVE READ THE ABOVE ACCOUNTING OF MY MEDICAL ASSESSMENT AND I FIND IT TO BE TRUE AND ACCURATE.

INMATE: [Signature]DATE: 3/13/06TIME: 7:27BOOK OFFICER: [Signature]

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

02/22/2006

15:33:09

LEE COUNTY SHERIFF'S C. ICF  
INMATE RELEASE SHEET

PAGE 1

BOOKING NO: 060000564

INMATE NAME: SANFORD JEFFERY BERNARD

ALIAS:

ALIAS:

RACE: B SEX: M

HT: 6'01" HAIR: BLK

WT: 255 EYES: BRO

CITY/ST/ZIP: OPELIKA, AL 36801

HOME PHONE: 000-000-0000

DOB: 07/28/1965 AGE: 40

PLCE BIRTH: INDIANAPOLLIS

STATE: IN

M. STATUS: SINGLE

RELIGION: CHRISTIAN

GANG ASSOC: NONE

SCARS/TATTOOS: NONE

KNOWN ENEMIES: NONE

REMARKS: NONE

COMPLEX:

SSN: 000-00-0000

DL ST: AL DLN: 00000000

SID:

LOCID: 3823

## NEXT OF KIN

NEXT OF KIN: JOAN FOREMAN

ADDRESS: SAA

CITY/ST/ZIP: ,

REMARKS:

RELATIONSHIP: FRIEND

PHONE: 000-864-0973

## EMPLOYER INFO

EMPLOYED: N

EMPLOYER NAME: SOUTHERN UNION

ADDRESS:

CITY/ST/ZIP: OPELIKA, AL 36801

PHONE: 334-745-0325

## MEDICAL

HANDICAPPED: Y NEEDS:

GLASSES: N SMOKE: N

MEDICAL NEEDS: N NEEDS: N

PHYSICIAN:

PHONE: 000-000-0000

REMARKS: FRACTURED WRIST,

REMARKS: ALLERGEIC TO PENNCILLIN, WASP STINGS, BEE STINGS

REMARKS:

## PROPERTY

CASH: \$00.00

DESCRIPTION:

ADD. PROPERTY: WALLET, BELT, HAT, JACKET, DU RAG,

ADD. PROPERTY:

ADD. PROPERTY:

BIN NUMBER: 193

VEH IMPOUNDED:

IMPOUND LOT:

REMARKS:

REMARKS:

I HAVE READ THE ABOVE ACCOUNTING OF MY PERSONAL INFORMATION, MEDICAL INFORMATION, MONEY, AND OTHER PROPERTY AND I FIND IT TO BE TRUE AND ACCURATE.

INMATE: 

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

BOOK OFFICER: 

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

02/22/2006 15:33:09 LEE COUNTY SHERIFF'S C. ICF INMATE RELEASE SHEET PAGE 2

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

COURT: ATTORNEY ON REC:  
JUDGE: PHONE: 000-000-0000  
REMARKS:  
REMARKS:

BOOK DATE: 02/01/2006 BOOK TIME: 10:29 BOOK TYPE: NORMAL

ARREST DATE: 02/01/2006 BOOKING OFFICER: BLACK  
ARREST DEPT: LCSO CELL ASSIGNMENT:  
ARRST OFFICER: GRIER MEAL CODE: 01 LEE COUNTY  
PROJ. RLSDATE: 00/00/0000 FACILITY: 01 COUNTY JAIL  
SEARCH OFFCR: JUKES CLASSIFICATION:  
TYPE SEARCH: WORK RELEASE: N  
INTOX RESULTS:

HOLDS: N  
AGENCY: REASON:  
AGENCY: REASON:  
AGENCY: REASON:  
AGENCY: REASON:

NOTES:  
NOTES:  
NOTES:

RELEASE DATE: 02/22/2006 RELEASE TIME: 15:31 # DAYS SERVED: 22

RELEASE OFFICER: COBB  
RELEASE TYPE: BONDED BY BAD BOYS BOND  
REMARKS: CLEARED BY SHERIKA  
REMARKS: COURT DATE 4-12-06 0900 AM  
REMARKS:

I HAVE READ THE ABOVE ACCOUNTING OF MY PERSONAL INFORMATION, MEDICAL INFORMATION, MONEY, AND OTHER PROPERTY AND I FIND IT TO BE TRUE AND ACCURATE.

INMATE: [Signature] DATE: \_\_\_\_\_ TIME: \_\_\_\_\_  
BOOK OFFICER: \_\_\_\_\_ DATE: \_\_\_\_\_ TIME: \_\_\_\_\_



02/22/2006 15:33:09 LEE COUNTY SHERIFF'S O. ICT INMATE CHARGE SHEET PAGE 3

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

CHARGE NO: 1 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: CC86-012 # OF COUNTS: 1  
OFFENSE: FTA/ROB I WARRANT #:  
CASE #:  
BOND AMT: 0 FINE: \$100.00  
BAIL AMT:  
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/01/2006 ARST AGENCY: LCSO  
ARST OFFICR: GRIER COUNTY:  
COURT: JUDGE: WALKER  
DEF ATTORNY: DIST ATTORNEY:  
COMMENTS: REVIEW 3-17-06  
COMMENTS:  
COMMENTS: INMATE RELEASED BY L43D36

CHARGE NO: 2 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: CC92-074 # OF COUNTS: 1  
OFFENSE: FTA/TOP II WARRANT #:  
CASE #:  
BOND AMT: 0 FINE: \$100.00  
BAIL AMT:  
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/01/2006 ARST AGENCY: GRIER  
ARST OFFICR: LCSO COUNTY:  
COURT: JUDGE: WALKER  
DEF ATTORNY: DIST ATTORNEY:  
COMMENTS: RELEASE IF \$100 PURGE IS PAID;IF NOT REL ON 2/13/06 830 AM  
COMMENTS: READ NOTES PLEASE!  
COMMENTS: INMATE RELEASED BY L43D36

CHARGE NO: 3 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: DR96-492 # OF COUNTS: 1  
OFFENSE: CS WARRANT #:  
CASE #:  
BOND AMT: 0 FINE: \$0.00  
BAIL AMT:  
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/01/2006 ARST AGENCY: LCSO  
ARST OFFICR: GRIER COUNTY:  
COURT: JUDGE: WALKER  
DEF ATTORNY: DIST ATTORNEY:  
COMMENTS:  
COMMENTS:  
COMMENTS: INMATE RELEASED BY L43D36

02/22/2006 15:33:09 LEE COUNTY SHERIFF'S C. ICF  
INMATE CHARGE SHEET PAGE 4

=====

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

=====

CHARGE NO: 4 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: WR05-1375 # OF COUNTS: 1  
OFFENSE: NWN I WARRANT #:   
CASE #:   
BOND AMT: 500 FINE: \$0.00  
BAIL AMT:   
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/01/2006 ARST AGENCY: LCSO  
ARST OFFICR: GRIER COUNTY:   
COURT: JUDGE:   
DEF ATTORNY: DIST ATTORNEY:   
COMMENTS:   
COMMENTS:   
COMMENTS: INMATE RELEASED BY L43D36

-----

CHARGE NO: 5 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: WR 06-157 # OF COUNTS: 1  
OFFENSE: NWN I WARRANT #: WR 06-157  
CASE #: WR 06-157  
BOND AMT: 250 FINE: \$0.00  
BAIL AMT:   
INIT APPEAR: 02/22/2006 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/22/2006 ARST AGENCY: LCSO  
ARST OFFICR: COBB COUNTY: LEE  
COURT: DIS JUDGE: BUSH  
DEF ATTORNY: DIST ATTORNEY:   
COMMENTS:   
COMMENTS:   
COMMENTS: INMATE RELEASED BY L43D36

-----

CHARGE NO: 6 DISPOSITION: RELEASED HOLD: N

ALA STATUTE: WR 06-158 # OF COUNTS: 1  
OFFENSE: NWN I WARRANT #: WR 06-158  
CASE #:   
BOND AMT: 500 FINE: \$0.00  
BAIL AMT:   
INIT APPEAR: 00/00/0000 SENTENCE DATE: 00/00/0000  
RELEASE DTE: 02/22/2006  
ARREST DATE: 02/22/2006 ARST AGENCY: LCSO  
ARST OFFICR: COBB COUNTY: LEE  
COURT: DIS JUDGE: BUSH  
DEF ATTORNY: DIST ATTORNEY:   
COMMENTS:   
COMMENTS:   
COMMENTS: INMATE RELEASED BY L43D36

-----

LEE COUNTY SHERIFF'S OFFICE  
INMATE BOOKING SHEET

PAGE 1

11/2006 10:38:42

BOOKING NO: 060000564

INMATE NAME: SANFORD JEFFERY BERNARD

ALIAS:

ALIAS:

ADDRESS: [REDACTED]

CITY/ST/ZIP: OPELIKA, AL 36801

HOME PHONE: 0 [REDACTED] 25

DOB: 12/15/65 AGE: 40

PLACE OF BIRTH: INDIANAPOLIS

STATE: IN

MARRITAL STATUS: SINGLE

RELIGION: CHRISTIAN

LEGAL ASSOC: NONE

RACE: B

SEX: M

HT: 6'01"

HAIR: BLK

WT: 255

EYES: BRO

COMPLEX:

SSN: [REDACTED] 95

DL ST: AL

DLN: [REDACTED]

SID:

LOCID: 3823

NCTC  
Clear  
CrittendonState of Alabama  
Unified Judicial System

Form C-42

Rev 6/88

ORDER OF RELEASE  
FROM JAIL

Case Number

CC 86 012  
CC 97 074STATE OF ALABAMA  
UNIFIED JUDICIAL SYSTEM  
LEE COUNTY FORM CC-30

## COMMITTAL TO CUSTODY

CASE NUMBER

DR 96 492  
ID YR Case No.Barbara Sanford  
PLAINTIFF,

VS.

IN THE Circuit COURT OF

LEE COUNTY, ALABAMA

CASE NO. DR 96 492

State of Alabama  
Unified Judicial System

Form C-42

Rev 6/88

ORDER OF RELEASE  
FROM JAIL

Case Number

DR 96 492

IN THE C COURT OF Lee COUNTY

STATE OF ALABAMA

v. Jeffery Sanford

TO THE JAILER WITH CUSTODY OF THE DEFENDANT

You are ordered to release from your custody the above named defendant, charged with the offense of

Reason for Release

DTP Child Support  
New date of May 24 06  
at 8:30 am

Date

2-21-06

By:

COURT RECORD (Original)

JAILER (Copy)

Judge/Clerk

BOOK OFFICER: W. A. [REDACTED]

LEE COUNTY SHERIFF'S OFFICE  
INMATE BOOKING SHEET

PAGE 2

02/01/2006 10:38:42

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

ATTORNEY ON REC:

PHONE: 000-000-0000

COURT:

JUDGE:

REMARKS:

REMARKS:

BOOK DATE: 02/01/2006 BOOK TIME: 10:29 BOOK TYPE: NORMAL

ARREST DATE: 02/01/2006

ARREST DEPT: LCSO

ARRST OFFICER: GRIER

PROJ. RLS DATE: 00/00/0000

SEARCH OFFCR: JUKES

TYPE SEARCH:

INTOX RESULTS:

BOOKING OFFICER: BLACK

CELL ASSIGNMENT: HC3

MEAL CODE: 01 LEE COUNTY

FACILITY: 01 COUNTY JAIL

CLASSIFICATION:

WORK RELEASE: N

HOLDS: N

AGENCY:

AGENCY:

AGENCY:

AGENCY:

REASON:

REASON:

REASON:

REASON:

NOTES:

NOTES:

NOTES:

LEE COUNTY SHERIFF'S OFFICE

PAGE 3

02/01/2006 10:38:42

INMATE CHARGE SHEET

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

CHARGE NO: 1 DISPOSITION: OPEN

HOLD: N

ALA STATUTE: CC86-012  
OFFENSE: FTA/ROB I# OF COUNTS: 1  
WARRANT #:CASE #:  
BOND AMT: 0  
BAIL AMT:

FINE: \$0.00

INIT APPEAR: 00/00/0000  
RELEASE DTE: 00/00/0000  
ARREST DATE: 02/01/2006  
ARST OFFICR: GRIER

SENTENCE DATE: 00/00/0000

ARST AGENCY: LCSO  
COUNTY:  
JUDGE: WALKERCOURT:  
DEF ATTORNY:  
COMMENTS:  
COMMENTS:  
COMMENTS:

DIST ATTORNEY:

CHARGE NO: 2 DISPOSITION: OPEN

HOLD: N

ALA STATUTE: CC92-074  
OFFENSE: FTA/TOP II# OF COUNTS: 1  
WARRANT #:CASE #:  
BOND AMT: 0  
BAIL AMT:

FINE: \$0.00

INIT APPEAR: 00/00/0000  
RELEASE DTE: 00/00/0000  
ARREST DATE: 02/01/2006  
ARST OFFICR: LCSO

SENTENCE DATE: 00/00/0000

ARST AGENCY: GRIER  
COUNTY:  
JUDGE: WALKERCOURT:  
DEF ATTORNY:  
COMMENTS:  
COMMENTS:  
COMMENTS:

DIST ATTORNEY:

CHARGE NO: 3 DISPOSITION: OPEN

HOLD: N

ALA STATUTE: DR96-492  
OFFENSE: CS# OF COUNTS: 1  
WARRANT #:CASE #:  
BOND AMT: 0  
BAIL AMT:

FINE: \$0.00

INIT APPEAR: 00/00/0000  
RELEASE DTE: 00/00/0000  
ARREST DATE: 02/01/2006  
ARST OFFICR: GRIER

SENTENCE DATE: 00/00/0000

ARST AGENCY: LCSO  
COUNTY:  
JUDGE: WALKERCOURT:  
DEF ATTORNY:  
COMMENTS:  
COMMENTS:  
COMMENTS:

DIST ATTORNEY:

LEE COUNTY SHERIFF'S OFFICE  
INMATE CHARGE SHEET

PAGE 4

02/01/2006 10:38:42

BOOKING NO: 060000564 INMATE NAME: SANFORD JEFFERY BERNARD

CHARGE NO: 4 DISPOSITION: OPEN

HOLD: N

ALA STATUTE: WR05-1375

# OF COUNTS: 1

OFFENSE: NWN1

WARRANT #:

CASE #:

FINE: \$0.00

BOND AMT: 500

BAIL AMT:

SENTENCE DATE: 00/00/0000

INIT APPEAR: 00/00/0000

RELEASE DTE: 00/00/0000

ARREST DATE: 02/01/2006

ARST AGENCY: LCSO

ARST OFFICR: GRIER

COUNTY:

COURT:

JUDGE:

DEF ATTORNY:

DIST ATTORNEY:

COMMENTS:

COMMENTS:

COMMENTS:

LEE COUNTY SHERIFF'S OFFICE  
MEDICAL SCREENING FORM

PAGE 1

02/01/2006 10:38:42

Booking No: 060000564 Date: 02/01/2006 Time: 10:29 Type: NORMAL  
 Facility: COUNTY JAIL  
 Agency to Bill: LEE COUNTY

Inmate Name: SANFORD JEFFERY BERNARD Race: B Sex: M  
 DOB: 12/03/1965 Age: 40 SSN: [REDACTED] Height: 6'01" Weight: 255

- N 1. Is inmate unconscious?
- N 2. Does inmate have any visible signs of trauma, illness, obvious pain and bleeding, requiring immediate emergency or doctor's care?
- N 3. Is there obvious fever, swollen lymph nodes, jaundice or other evidence of infection that might spread through the facility?
- N 4. Any signs of poor skin condition, vermin, rashes or needle marks?
- N 5. Does inmate appear to be under the influence of drugs or alcohol?
- N 6. Any visible signs of alcohol or drug withdrawal?
- N 7. Does inmate's behavior suggest the risk of suicide or assault?
- N 8. Is inmate carrying any medication?
- N 9. Does the inmate have any physical deformities?
- N 10. Does inmate appear to have psychiatric problems?
11. Do you have or have you ever had or has anyone in your family ever had any of the following?
- |                         |                                   |                              |
|-------------------------|-----------------------------------|------------------------------|
| <u>Yes</u> a. Allergies | <u>N</u> f. Fainting Spells       | <u>N</u> k. Seizures         |
| <u>N</u> b. Arthritis   | <u>N</u> g. Hearing Condition     | <u>N</u> l. Tuberculosis     |
| <u>N</u> c. Asthma      | <u>N</u> h. Hepatitis             | <u>Yes</u> m. Ulcers         |
| <u>Yes</u> d. Diabetes  | <u>Yes</u> i. High Blood Pressure | <u>N</u> n. Venereal Disease |
| <u>N</u> e. Epilepsy    | <u>N</u> j. Psychiatric Disorder  | <u>N</u> o. Other (Specify)  |

Other: \_\_\_\_\_

12. For females only:

- N a. Are you pregnant?
- N b. Do you take birth control pills?
- N c. Have you recently delivered?



LEE COUNTY SHERIFF'S OFFICE

02/01/2006 10:38:42

MEDICAL SCREENING FORM

PAGE 2

Booking No: 060000564 Date: 02/01/2006 Time: 10:29 Type: NORMAL  
 Agency to Bill: LEE COUNTY Facility: COUNTY JAIL

Inmate Name: SANFORD JEFFERY BERNARD Race: B Sex: M  
 DOB: 12/25/65 Age: 40 SSN: [REDACTED] Height: 6'01" Weight: 255

- YES 13. Have you recently been hospitalized or treated by a doctor?
- YES 14. Do you currently take any non-prescription medication or medication prescribed by a doctor?
- YES 15. Are you allergic to any medication?
- N 16. Do you have any handicaps or conditions that limit activity?
- N 17. Have you ever attempted suicide or are you thinking about it now?
- N 18. Do you regularly use alcohol or street drugs?
- N 19. Do you have any problems when you stop drinking or using drugs?
- N 20. Do you have a special diet prescribed by a physician?
- N 21. Do you have any problems or pain with your teeth?
- YES 22. Do you have any other medical problems we should know about?

Penicillin  
colon Cancer -

I HAVE READ THE ABOVE ACCOUNTING OF MY MEDICAL ASSESSMENT AND I FIND IT TO BE TRUE AND ACCURATE.

INMATE: [Signature]

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_

BOOK OFFICER: [Signature]

DATE: \_\_\_\_\_

TIME: \_\_\_\_\_